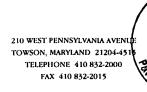
I MALL D - PERIOJ I RAMIONII I I AL Complete and send this form ogether w Mail Stop ISS FEE ipplicable fee(s), to: Mail Commissioner Lor Patents MAY 1 8 2005 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000 INSTRUCTIONS: The part would be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 25223 03/29/2005 WHITEFORD, TAYLOR & PRESTON, LLP Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. ATTN: GREGORY M STONE SEVEN SAINT PAUL STREET BALTIMORE, MD 21202-1626 05/19/2005 WABDELR3 00000068 09966319 (Signature 700.00 OP 01 FC:2501 300.00 OP (Date) 02 FC:1504 FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 09/966,319 09/28/2001 09140/00001 Christine Gosden 3153 TITLE OF INVENTION: ICONOGRAPHIC MEDICAL AND POPULATION SURVEY AND SYSTEM AND METHOD FOR USING THE SAME APPLN, TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$1000 06/29/2005 **EXAMINER ART UNIT** CLASS-SUBCLASS PAIK, STEVE S 2876 235-487000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Whiteford, Taylor & Preston, 44P (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. ☐ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1479 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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May 17, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application Of

: Christine Gosden and Derek Gardener

Serial No.

: 09/966,319

Filed

: September 28, 2001

Group Art Unit

: 2876

Examiner

: Paik, Steve S.

Attorney Docket No.

: 09140/00001

Title

: ICONOGRAPHIC MEDICAL AND POPULATION SURVEY

AND SYSTEM AND METHOD FOR USING THE SAME

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

ISSUE FEE TRANSMITTAL

Honorable Commissioner:

Enclosed for filing in the above-referenced application, please find the following:

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- 2. Our check in the amount of \$1,000.00 to cover the Issue Fee (\$700.00-small entity) and Publication Fee (\$300.00).

Commissioner for Patents May 17, 2005 Page 2

3. Our post card. Please date stamp and return.

Please charge any unanticipated fees, or credit any overpayment, to our Deposit Account No.: 50-1479 (a duplicate copy of this charge authorization is attached).

Respectfully Submitted, Christine Gosden

Date: May 17, 2005

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DATED: May 17, 2005